

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2016

MM/DD/YYYY

12/31/2016

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(617)233-2664		01/24/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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10/01/2016

MM/DD/YYYY

12/31/2016

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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Lead: Water Hardness 0-24.99 mg/l

External Outfall

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Discharge

MONITORING PERIOD

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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External OutfallNo ☐
Discharge

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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Zinc: Water Hardness 0-24.99 mg/l

External Outfall

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Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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03/31/2017

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Lead: Water Hardness 0-24.99 mg/l

External Outfall

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Discharge

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.036	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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				(781)873-1667		11/22/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2017

MM/DD/YYYY

03/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.1	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.44	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	27	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(617)233-2664		04/04/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2017

MM/DD/YYYY

03/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.026	mg/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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				(617)233-2664		04/04/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2017

MM/DD/YYYY

03/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.16	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(617)233-2664		04/04/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2017

MM/DD/YYYY

03/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.39	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino	TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(617)233-2664	04/04/2017
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	730	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	37	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	19	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	470	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(617)233-2664		04/04/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2017

MM/DD/YYYY

03/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.66	mg/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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				(617)233-2664		04/04/2017	
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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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ADDRESS: 69 Rover Street
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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

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002-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2017

MM/DD/YYYY

03/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.5	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(617)233-2664		04/04/2017	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2017

MM/DD/YYYY

03/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.066	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(617)233-2664		04/04/2017	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	150	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.5	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.3	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	49	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(617)233-2664		04/04/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2017

MM/DD/YYYY

03/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.14	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(617)233-2664		04/04/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2017

MM/DD/YYYY

03/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.14	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(617)233-2664		04/04/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141	001-LA
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.043	mg/L	1	Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(781)873-1667	08/03/2017
TYPED OR PRINTED		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	250	mg/L	1	Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	mg/L	1	Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.5	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	19	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(781)873-1667		08/03/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2017

MM/DD/YYYY

06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.027	mg/L	1	Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(781)873-1667		08/03/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.2	mg/L	1	Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(781)873-1667		08/03/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2017

MM/DD/YYYY

06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.07	mg/L	1	Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino	TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(781)873-1667	08/03/2017
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2017

MM/DD/YYYY

06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	240	mg/L	1	Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	mg/L	1	Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.3	mg/L	1	Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	160	mg/L	1	Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
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TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2017

MM/DD/YYYY

06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.12	mg/L	1	Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(781)873-1667		08/03/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2017

MM/DD/YYYY

06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.25	mg/L	1	Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(781)873-1667		08/03/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141	003-LA
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2017	06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.082	mg/L	1	Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino	TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(781)873-1667	08/03/2017
TYPED OR PRINTED			AREA Code NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2017

MM/DD/YYYY

06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	400	mg/L	1	Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2	mg/L	1	Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	mg/L	1	Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	130	mg/L	1	Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(781)873-1667		08/03/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2017

MM/DD/YYYY

06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.13	mg/L	1	Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(781)873-1667		08/03/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2017

MM/DD/YYYY

06/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.3	mg/L	1	Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
				(781)873-1667		08/03/2017	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141	001-IW
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2016	09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Impaired Water

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved percent saturation	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00301 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	%		Annual	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	SU		Annual	Grab
Aluminum, total [as Al]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01105 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Annual	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(781)873-1667	11/22/2017
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2017

MM/DD/YYYY

09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(781)873-1667		11/22/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
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TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2017

MM/DD/YYYY

09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2017

MM/DD/YYYY

09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2017

MM/DD/YYYY

09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

NHR053141	002-N1
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2017	09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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CONCORD, NH 03301

NHR053141

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2017

MM/DD/YYYY

09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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CONCORD, NH 03301

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MM/DD/YYYY

07/01/2017

MM/DD/YYYY

09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino	TELEPHONE	DATE
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TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2017

MM/DD/YYYY

09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No qualifying rain event

DISCHARGE MONITORING REPORT (DMR)

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Everett, MA 02149

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2017

MM/DD/YYYY

09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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MM/DD/YYYY

07/01/2017

MM/DD/YYYY

09/30/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2017

MM/DD/YYYY

12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .001	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

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10/01/2017

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12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	14	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.3	mg/L	1	Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .05	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	25	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(781)873-1667		11/22/2017	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2017

MM/DD/YYYY

12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .001	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2017

MM/DD/YYYY

12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.013	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2017

MM/DD/YYYY

12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< .001	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino		TELEPHONE		DATE	
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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2017

MM/DD/YYYY

12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	15	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.9	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.1	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	29	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(781)873-1667		02/07/2018	
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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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PERMIT NUMBER

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2017

MM/DD/YYYY

12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.046	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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MONITORING PERIOD

MM/DD/YYYY

10/01/2017

MM/DD/YYYY

12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.14	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2017

MM/DD/YYYY

12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2017

MM/DD/YYYY

12/31/2017

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.004	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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				(781)873-1667		02/16/2018	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2018

MM/DD/YYYY

03/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	12	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.8	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.05	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	17	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Keri Beck		TELEPHONE		DATE	
				(781)706-7003		06/08/2018	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2018

MM/DD/YYYY

03/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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			(781)706-7003		06/08/2018	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2018

MM/DD/YYYY

03/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.07	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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				(781)706-7003		06/08/2018	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.03	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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				(781)706-7003		06/08/2018	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	100	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5.4	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	44	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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				(781)706-7003		06/08/2018	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2018

MM/DD/YYYY

03/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	48	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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				(781)706-7003		06/08/2018	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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ADDRESS: 69 Rover Street
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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2018

MM/DD/YYYY

03/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.16	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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				(781)706-7003		06/08/2018	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2018

MM/DD/YYYY

03/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.012	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Richard Carmosino	TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(781)873-1667	02/16/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	19	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.4	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.84	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	17	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(781)706-7003		06/08/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2018

MM/DD/YYYY

03/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	17	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2018

MM/DD/YYYY

03/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.047	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2018

MM/DD/YYYY

06/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0079	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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				(781)706-7003		06/22/2018	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

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DISCHARGE MONITORING REPORT (DMR)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

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001-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2018

MM/DD/YYYY

06/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	13	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	15	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.093	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	28	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2018

MM/DD/YYYY

06/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.9	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Keri Beck	TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(781)706-7003	06/22/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2018

MM/DD/YYYY

06/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.041	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Keri Beck		TELEPHONE		DATE	
				(781)706-7003		06/22/2018	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.058	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2018

MM/DD/YYYY

06/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	190	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.4	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.8	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	160	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2018

MM/DD/YYYY

06/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	86	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

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002-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2018

MM/DD/YYYY

06/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.19	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.17	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	180	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	11	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4.2	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	110	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2018

MM/DD/YYYY

06/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	260	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2018

MM/DD/YYYY

06/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.48	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(781)706-7003	06/22/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-IW

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Impaired Water

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved percent saturation	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****					
00301 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	%		Annual	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.93	SU		Annual	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	SU		Annual	Grab
Aluminum, total [as Al]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.066	mg/L		Annual	Grab
01105 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Annual	Grab

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				(603)702-2583		10/31/2018	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0054	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	90	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	27	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.066	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	37	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		10/31/2018	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.6	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.02	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.051	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	47	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4.9	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.5	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	88	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	440	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(603)702-2583	10/31/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.16	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(603)702-2583	10/31/2018
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
Gary Raddatz/ Regional Environmental Manager				(603)702-2583		12/10/2018	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Outfall 3 - no visible point of discharge on date of sample event

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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Gary Raddatz/ Regional Environmental Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(603)702-2583		12/10/2018	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Outfall 3 - no visible point of discharge on day of sample event

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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Gary Raddatz/ Regional Environmental Manager				(603)702-2583		12/10/2018	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

outfall 3 - no visible point of discharge on day of sample event.

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

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CONCORD, NH 03301

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2018

MM/DD/YYYY

09/30/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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Gary Raddatz/ Regional Environmental Manager				(603)702-2583		12/10/2018	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Outfall 3 - no visible discharge on day of sample event.

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

MONITORING PERIOD

MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		03/11/2019	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

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PERMIT NUMBER

001-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		03/11/2019	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(603)702-2583		03/11/2019	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

MONITORING PERIOD

MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

MONITORING PERIOD

MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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10/01/2018

MM/DD/YYYY

12/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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10/01/2018

MM/DD/YYYY

12/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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CONCORD, NH 03301

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MM/DD/YYYY

10/01/2018

MM/DD/YYYY

12/31/2018

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI E				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

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MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0084	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 5	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.2	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.11	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	16	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.012	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		05/31/2019	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.08	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Frozen conditions at outfall.

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Frozen conditions at outfall.

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Frozen conditions at outfall.

DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

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PERMIT NUMBER

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Frozen conditions at outfall.

DISCHARGE MONITORING REPORT (DMR)

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No discernable flow. Outfall 3 as designated appears to be qualified as sheet flow over land.

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141	003-N1
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
01/01/2019	03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(603)702-2583	05/31/2019
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

No discernable flow. Outfall 3 as designated appears to be qualified as sheet flow over land.

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2019

MM/DD/YYYY

03/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.01	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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NHR053141

PERMIT NUMBER

001-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 8	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4.6	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.16	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	25	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0071	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.062	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		08/29/2019	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0014	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	12	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	6.7	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.21	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	81	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0031	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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CONCORD, NH 03301

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002-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.011	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141	003-LA
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
04/01/2019	06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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				(603)702-2583		08/29/2019	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2019

MM/DD/YYYY

06/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141	001-IW
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2018	09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Impaired Water

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved percent saturation	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	40.5	%		Annual	Grab
00301 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	%		Annual	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.29	SU		Annual	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	SU		Annual	Grab
Aluminum, total [as Al]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.084	mg/L		Annual	Grab
01105 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Annual	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(603)702-2583	11/26/2019
TYPED OR PRINTED				AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0062	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

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DISCHARGE NUMBER

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MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 5	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.86	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.084	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	32	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	92	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		11/26/2019	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.026	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		11/26/2019	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.039	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz	TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(603)702-2583	11/26/2019
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141	002-N1
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
07/01/2019	09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	100	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5.6	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.2	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	210	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	77	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.31	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

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PERMIT NUMBER

003-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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TYPED OR PRINTED			AREA Code	NUMBER

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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ADDRESS: 69 Rover Street
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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

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PERMIT NUMBER

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2019

MM/DD/YYYY

09/30/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

MONITORING PERIOD

MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0058	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		01/28/2020	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 5	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.6	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.06	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	19	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(603)702-2583	11/28/2020
TYPED OR PRINTED				AREA Code	NUMBER

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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CONCORD, NH 03301

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.006	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(603)702-2583	01/28/2020
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.051	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(603)702-2583		11/28/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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NHR053141

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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PERMIT NUMBER

002-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

MONITORING PERIOD

MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI 5				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141	003-N1
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MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2019	12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2019

MM/DD/YYYY

12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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12/31/2019

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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MM/DD/YYYY

01/01/2020

MM/DD/YYYY

03/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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01/01/2020

MM/DD/YYYY

03/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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MM/DD/YYYY

03/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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				(603)702-2583		05/14/2020	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2020

MM/DD/YYYY

03/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2020

MM/DD/YYYY

03/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2020

MM/DD/YYYY

03/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2020

MM/DD/YYYY

03/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2020

MM/DD/YYYY

03/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI Z				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(603)702-2583	09/08/2020
TYPED OR PRINTED			AREA Code	NUMBER

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		09/08/2020	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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CONCORD, NH 03301

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

04/01/2020

MM/DD/YYYY

06/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-IW

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Impaired Water

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved percent saturation	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	44.7	%		Annual	Grab
00301 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	%		Annual	Grab
pH	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.41	SU		Annual	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	SU		Annual	Grab
Aluminum, total [as Al]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.24	mg/L		Annual	Grab
01105 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Annual	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0058	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.5	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.44	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.24	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	32	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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NHR053141

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.015	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.034	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.3	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		(603)702-2583		11/24/2020	
TYPED OR PRINTED				AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	220	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	46	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.9	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	180	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		11/24/2020	
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DISCHARGE MONITORING REPORT (DMR)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.78	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

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002-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3.1	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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				(603)702-2583		11/24/2020	
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CONCORD, NH 03301

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MONITORING PERIOD

MM/DD/YYYY

07/01/2020

MM/DD/YYYY

09/30/2020

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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				(603)702-2583		11/24/2020	
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DISCHARGE MONITORING REPORT (DMR)

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Everett, MA 02149

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2020

MM/DD/YYYY

12/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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				(603)702-2583		12/01/2021	
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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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				(603)702-2583		02/01/2021	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

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001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2020

MM/DD/YYYY

12/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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10/01/2020

MM/DD/YYYY

12/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(603)702-2583	12/01/2021
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2020

MM/DD/YYYY

12/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.019	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz	TELEPHONE	DATE
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(603)702-2583	02/01/2021
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141	002-N1
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
10/01/2020	12/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	31	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.5	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	26	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		12/01/2021	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2020

MM/DD/YYYY

12/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	27	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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Everett, MA 02149

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.07	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2020

MM/DD/YYYY

12/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

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NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2020

MM/DD/YYYY

12/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

10/01/2020

MM/DD/YYYY

12/31/2020

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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				(603)702-2583		12/01/2021	
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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

MONITORING PERIOD

MM/DD/YYYY

10/01/2020

MM/DD/YYYY

12/31/2020

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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				(603)702-2583		12/01/2021	
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2021

MM/DD/YYYY

03/31/2021

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.0095	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		04/14/2021	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

MONITORING PERIOD

MM/DD/YYYY

01/01/2021

MM/DD/YYYY

03/31/2021

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 5	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.27	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.056	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	20	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2021

MM/DD/YYYY

03/31/2021

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	30	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

001-ZA

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.12	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2021

MM/DD/YYYY

03/31/2021

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.02	mg/L		Quarterly	Grab
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-N1

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2021

MM/DD/YYYY

03/31/2021

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	45	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3	mg/L		Quarterly	Grab
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1.6	mg/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	71	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		04/14/2021	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-UA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2021

MM/DD/YYYY

03/31/2021

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	48	ug/L		Quarterly	Grab
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2021

MM/DD/YYYY

03/31/2021

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	.098	mg/L		Quarterly	Grab
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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NHR053141

PERMIT NUMBER

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

01/01/2021

MM/DD/YYYY

03/31/2021

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No
Discharge☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total [as Pb]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.014 MAXIMUM	mg/L		Quarterly	Grab

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LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Iron, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
00980 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.75 MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

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MONITORING PERIOD

MM/DD/YYYY

01/01/2021

MM/DD/YYYY

03/31/2021

DMR Mailing ZIP CODE: 03301

MINOR

Copper: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total [as Cu]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	3.8 MAXIMUM	ug/L		Quarterly	Grab

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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(603)702-2583	04/14/2021
TYPED OR PRINTED			AREA Code	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

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01/01/2021

MM/DD/YYYY

03/31/2021

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total [as Zn]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI C				
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	.04 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2021

MM/DD/YYYY

09/30/2021

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	24	ug/L		Quarterly	Grab
01114 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	14 MAXIMUM	ug/L		Quarterly	Grab

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				(603)702-2583		10/25/2021	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

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MM/DD/YYYY

07/01/2021

MM/DD/YYYY

09/30/2021

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	13	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	280	ug/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1100 MAXIMUM	ug/L		Quarterly	Grab
Copper, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	22	ug/L		Quarterly	Grab
01119 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	5.19 MAXIMUM	ug/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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CONCORD, NH 03301

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MM/DD/YYYY

07/01/2021

MM/DD/YYYY

09/30/2021

DMR Mailing ZIP CODE: 03301

MINOR

Railroad, Local Highway Passenger Motor Freight
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.6	*****	7.6	SU		Quarterly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MINIMUM	*****	Req. Mon. MAXIMUM	SU		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	13	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 10	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Quarterly	Grab

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07/01/2021

MM/DD/YYYY

09/30/2021

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	90	ug/L		Quarterly	Grab
01094 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	37 MAXIMUM	ug/L		Quarterly	Grab

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CONCORD, NH 03301

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MM/DD/YYYY

07/01/2021

MM/DD/YYYY

09/30/2021

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	59	ug/L		Quarterly	Grab
01114 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	14 MAXIMUM	ug/L		Quarterly	Grab

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Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

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DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2021

MM/DD/YYYY

09/30/2021

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	88	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	3800	ug/L		Quarterly	Grab
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1100 MAXIMUM	ug/L		Quarterly	Grab
Copper, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	100	ug/L		Quarterly	Grab
01119 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	5.19 MAXIMUM	ug/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	63	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Gary Raddatz		TELEPHONE		DATE	
				(603)702-2583		10/25/2021	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code	NUMBER	MM/DD/YYYY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-P1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Railroad, Local Highway Passenger Motor Freight
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	8.12	*****	8.12	SU		Quarterly	Grab
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MINIMUM	*****	Req. Mon. MAXIMUM	SU		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	88	mg/L		Quarterly	Grab
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	63	mg/L		Quarterly	Grab
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

002-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2021

MM/DD/YYYY

09/30/2021

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No

Discharge

☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	260	ug/L		Quarterly	Grab
01094 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	37 MAXIMUM	ug/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-LA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2021

MM/DD/YYYY

09/30/2021

DMR Mailing ZIP CODE: 03301

MINOR

Lead: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Lead, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01114 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	14 MAXIMUM	ug/L		Quarterly	Grab

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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCHNITZER NORTHEAST

ADDRESS: 69 Rover Street
Everett, MA 02149

FACILITY: SCHNITZER NORTHEAST POPLAR AVENUE FACILITY

LOCATION: 14 POPLAR AVENUE
CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-N1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Scrap Recycling and Waste Recycling Facilities
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	100 MAXIMUM	mg/L		Quarterly	Grab
Aluminum, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01104 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1100 MAXIMUM	ug/L		Quarterly	Grab
Copper, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01119 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	5.19 MAXIMUM	ug/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	120 MAXIMUM	mg/L		Quarterly	Grab

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DISCHARGE MONITORING REPORT (DMR)

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CONCORD, NH 03301

NHR053141

PERMIT NUMBER

003-P1

DISCHARGE NUMBER

DMR Mailing ZIP CODE: 03301

MINOR

Railroad, Local Highway Passenger Motor Freight
External OutfallNo ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****	NODI F	*****	NODI F				
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MINIMUM	*****	Req. Mon. MAXIMUM	SU		Quarterly	Grab
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Quarterly	Grab
Chemical Oxygen Demand [COD]	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
81017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. MAXIMUM	mg/L		Quarterly	Grab

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NHR053141

PERMIT NUMBER

003-ZA

DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY

07/01/2021

MM/DD/YYYY

09/30/2021

DMR Mailing ZIP CODE: 03301

MINOR

Zinc: Water Hardness 0-24.99 mg/l

External Outfall

No ☐
Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	NODI F				
01094 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	37 MAXIMUM	ug/L		Quarterly	Grab

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